24 Hours Notice Requested

## **BUILDING DEPARTMENT** PERMIT APPLICATION

1206 Columbia Ave Bridgeport, WA 98813

|   | Name or Name of Business         |                            |                               | APPLICANT: Complete this form within shaded area for the work to be done under this permit. |  |                       |     |     |  |
|---|----------------------------------|----------------------------|-------------------------------|---|--|-----------------------|-----|-----|--|
| ER  | Mailing Address                  |                            |                               | PLUMBING  |  |                       |     |     |  |
| OWNER   |                                  |                            | Telephone #                   | No.   | Type of Fixture or Item                    |                       | Fee |     |  |
|   |                                  |                            | Cell #                        |   | Water Closet (Toilet)                      | Water Closet (Toilet) |     |     |  |
|   | Name                             |                            |                               |   | Bathtub w/shower hea                       | d                     |     |     |  |
| F   |                                  |                            |                               |   | Lavatory (Wash Basin)                      |                       |     |     |  |
| ARCHITECT   | Address                          |                            |                               |   | Shower (stall) Kitchen Sink & Disposal     |                       |     |     |  |
| 동   | Ce                               |                            | Telephone #                   |   | Dishwasher                                 |                       |     |     |  |
| AR  |                                  |                            | Cell #                        |   | Laundry Tray                               |                       |     |     |  |
|   |                                  |                            |                               |   | Clothes Washer                             |                       |     |     |  |
|   | Name Owner/ Contactor            |                            |                               |   | Water Heater                               |                       |     |     |  |
| NC  | Address                          |                            |                               |   | Urinal                                     |                       |     |     |  |
| STC   |                                  |                            |                               |   | Drinking Fountain                          |                       |     |     |  |
| CONTRACTOR  | City/State/Zip                   |                            | Telephone #                   |   | Floor – Sink or Drain                      |                       |     |     |  |
| Ā   |                                  |                            | Cell #                        |   | Building Sewer                             |                       |     |     |  |
| 00  | State License Number             |                            |                               |   |  |                       |     |     |  |
|   |                                  |                            |                               |   | All – N/A                                  |                       |     |     |  |
|   | Residential Demolish Mechanical  |                            |                               |   |  |                       |     |     |  |
|   | Commercial Swimming Pool         |                            | Addition                      |   |  | Basic Fee             |     |     |  |
|   | ☐ New ☐ Plumbing Other           |                            |                               |   | To   |                       |     |     |  |
| Assessor's Tax Parcel Number  |                                  |                            |                               |   | CHANICAL                                   |                       |     |     |  |
| Physical Address  |                                  |                            |                               |   | ☐ LPG ☐ Electric Not heated or cooled      |                       |     |     |  |
| Lender  |                                  |                            |                               | No  | Type of Equipment Central Heater Heat Pump |                       | Fee | Fee |  |
| Nature of Work to be done   |                                  |                            |                               |   | Ventilation Fan                            |                       |     |     |  |
| New Construction  |                                  |                            |                               |   | Range Hood                                 |                       |     |     |  |
|   |                                  |                            |                               |   | Gas Fireplace                              |                       |     |     |  |
|   |                                  |                            |                               |   | Wood Stove                                 |                       |     |     |  |
|   |                                  |                            |                               |   |  |                       |     |     |  |
| NOTICE: This permit becomes null & void if work or construction authorized is not   |                                  |                            |                               |   |  |                       |     |     |  |
| commenced within 180 days, or if construction or work is suspended or abandoned for a   |                                  |                            |                               |   |  | 5 . 5                 |     |     |  |
| period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application & know the same to be true and correct. I will comply with all provisions of the laws & ordinances governing this type of work whether or not |                                  |                            |                               |   | Basic Fee Total Mechanical Permit          |                       |     |     |  |
|   |                                  |                            |                               |   | ding Fee Calculation                       | Valuation \$          |     |     |  |
| specified herein. Approval of this permit does not presume to give authority to violate or  |                                  |                            |                               |   | ing (001.322.10.01)                        | ,                     |     |     |  |
| cancel the provisions of any other state or local law regarding construction or   |                                  |                            |                               |   | bing (001.322.10.02)                       |                       |     |     |  |
| performance of construction.  |                                  |                            |                               |   | nanical (001.322.10.03)                    |                       |     |     |  |
| X Signature of Owner or Authorized Agent Date   |                                  |                            |                               |   | Check (001.345.83)                         |                       |     |     |  |
|   |                                  |                            |                               |   | Fee (\$4.50) (001.386.24.01)               |                       |     |     |  |
| _   | nature of Owner or Au<br>Setback | Street Setback             | Date Rear Setback             | Othe  | r<br>Clearing & Grading                    | 001.322.90.02         |     |     |  |
| Lt.   | Rt.                              | 2                          |                               |   | Water Hookup Right                         | 401.343.90.00         |     |     |  |
|   | ng R1                            | Lot Area                   | Vacant Site ☐ Yes ☐ No        |   | Sewer Hookup Right                         | 402.343.90.00         |     |     |  |
| Туре  | e of Construction                | Occupancy Group            | No. of Dwelling Units         |   |  |                       |     |     |  |
| Size  | of Building Sq. Ft.              | Basement Sq. Ft.           | Garage Sq. Ft.                |   |  |                       |     |     |  |
|   |                                  | Deel C. Fr                 | F:                            | 1   |  | Total Fee:            |     |     |  |
| Cove  | ered Porch Sq. Ft.               | Deck Sq. Ft. Other Sq. Ft. | Fireplace/Stove Culvert       | <del>                                     </del>  | Data Baid                                  |                       |     |     |  |
|   | e application received:          | Plans checked by:          | Approved for Issuance by:     | -   | Date Paid Amount paid                      |                       |     |     |  |
| Jace  | application received.            | . Idiio onconeu by.        | - pp. c rea re. locadillo sy. |   | Receipt Number                             |                       |     |     |  |

## WHEN SIGNED & DATED BELOW, THIS IS YOUR PERMIT AND RECEIPT.

Permission is hereby given to do the above described work, according to the conditions herein, and according to the approved plans and specifications pertaining thereto, subject to compliance with the ordinances of the City of Bridgeport.

| Permit Issued | . 2018 | Bv | Building Official |
|---------------|--------|----|-------------------|